REPORT OF THE MEDICAL OFFICER OF HEALTH, 1905.

Eighteenth Annual Report on the Health and Sanitary Condition of the East Grinstead Urban District for the Year ending 31st December, 1905.

Area : 6355 Acres. Population (Census of 1901 : 6,094.

	1903.	1904.	1905.
Population estimated to middle of year	6,300	6,400	6,500
Birth Rate per 1,000	25·2	23·5	20·1
General Death Rate per 1,000	9·8	10·6	8·9
Zymotic Death Rate per 1,000	0·0	·31	·61
Death Rate from Phthisis	·78	1·4	·76
Death Rate from Respiratory Diseases	1·7	1·4	·61
Deaths under one year to 1,000 Births	81·1	69·1	61·06
Deaths over 65, per-centage of total Deaths	22·6	31·7	31·03

Vital Statistics.

In 1905 the deaths of 79 persons at all ages and from all causes were recorded in the district, against 79 in 1904, and 84 in 1903. These 79 deaths were at the rate of 12·1 per 1,000 of the total population. Of this number eight were children under one year of age and were in the proportion of 6·1 per cent. of those born ; 18, or 31·03 per cent. were of persons 65 years of age and upwards. The deaths of six persons 80 years of age and upwards were recorded, the oldest being 96 years old ; eight children died under the age of one year, in the proportion of 61·06 per 1,000 registered births. Of the 79 recorded deaths, 17 occurred in the Workhouse, five in the Cottage Hospital, and six in the Sanatorium. Excluding these 28 deaths, the death rate was 7·8. Of the 79 deaths, 21 were of persons not residing in the district, but brought into it from outside districts, 15 of them dying in the Workhouse, three in the Cottage Hospital, and three in the Sanatorium.

Corrected Death Rate.

Excluding the deaths of the 21 persons who were admitted to public institutions in the town from outside districts, the correct death rate in the Urban District is 8·9 per 1,000 persons living. This is the lowest death rate ever recorded in East Grinstead, the previous lowest being 9·2 in 1901.

Births.

The births numbered 131, a decrease of 20 over those of the previous year ; 63 of these children were males, and 68 females, equal to a birth rate of 20·1 per 1,000 of the population. The birth rate, which had risen to 25·2 in 1903, shows a serious decline, and closely corresponds with the general decrease observed throughout the country.

Deaths from Zymotic Disease.

There were four deaths from Zymotic disease, viz. :—

Scarlet Fever	2
Diphtheria	1
Measles	1

in the ratio of ·61 per 1,000 of those living, although 85 cases of scarlet fever were notified there were only two deaths from this disease, a very low rate of mortality, which proves the exceptionally mild nature of the complaint.

Notification of Infectious Diseases.

Ninety cases were reported to me under the Notification of Infectious Diseases Act, as follows :—

Scarlet Fever	85
Diphtheria	2
Enteric	1
Puerperal Fever	1
Erysipelas	1

Eighty-one of the cases of scarlet fever and the two cases of diphtheria were removed to the Sanatorium, the other cases were isolated and treated at home.

There were six deaths in the Sanatorium, three of these were Rural cases. The three deaths from the Urban District included two from scarlet fever and one from diphtheria.

Scarlet Fever.

Scarlet fever existed in epidemic form throughout the year, a few cases being reported in each month. A peculiarity about this outbreak, which began in August, 1904, was in the ill-defined symptoms of many of the cases. German measles existed in the district during the earlier months of the year, and it was often quite impossible for any medical man to say in the early stages of illness from which of these two complaints his patients were suffering. There is no doubt that many of the patients sent to the Sanatorium as "scarlet," were in reality German measles, but a medical man on being called to a case presenting the ordinary symptoms of scarlet fever has no option but to send it to the Sanatorium. This difficulty in diagnosis existed especially in the earlier months of the year. Towards the Autumn the two diseases appeared to separate themselves and to present more characteristic symptoms. The infection does not appear to have been focussed in the Schools, but has apparently been spread chiefly by personal contact from one child to another. This opinion is borne out by the fact that no less than 29 of the 85 cases of scarlet fever notified to me were children under the age of five years; they were not attending School and were frequently attacked in houses where there had previously been no cases. Several children had the complaint so mildly that no notice was taken of it, and no medical advice obtained until peeling had commenced.

Realizing the difficulty of dealing with the epidemic, I asked the County Consulting Medical Officer of Health, Dr. A. G. Foulerton, to come and confer with me. Dr. Foulerton came on April 28th, and took an immense amount of trouble in investigating the epidemiology of the outbreak; he also visited the Sanatorium with me. In his report of this visit presented to the Council, Dr. Foulerton said that in his opinion many of the cases in the Sanatorium at that time were really cases of German measles; but he agreed with me that it would often be quite impossible to make a correct diagnosis in the early stages of the disease.

In May I wrote to the Local Government Board informing them of the existence of this epidemic and asking them to hold a public enquiry. The reply of the Local Government Board was to the effect that the outbreak was not of sufficient importance, and that they approved of the steps which had been taken to deal with the epidemic. Dr. Foulerton attended the Public Health Committee of the Council with me in November, and discussed the question of dealing with the epidemic.

The dis-infection of houses where fever has occurred has been efficiently carried out by your Surveyor; but however well this may be done, it is often exceedingly difficult to thoroughly dis-infect cottage dwellings without turning the inhabitants out. In some instances I have ordered bedding, &c., to be burnt when I have considered it impossible to carry out thorough dis-infection.

Diphtheria.

Only two cases of diphtheria were reported during the year, in each of these I attributed the disease to the escape of sewer gas into the house. One of these cases terminated fatally from heart failure.

Enteric.

Only one case of enteric—or typhoid fever—was notified to me. This case was imported, the patient failing with the fever two days after his arrival in the town on a visit.

Tubercle.

There were only five deaths from pulmonary phthisis or other tubercular diseases, in the proportion of 8·6 per cent. of the deaths from all causes, equal to a death rate of ·76 per 1,000 of those living. This is a very low death rate for this disease.

Cancer.

Seven persons died from cancer in the district, equal to a death rate of 1·07 per 1,000 of those living. So far nothing authoritative has been discovered to lead us to hope for a cure of this complaint, although a vast amount of research has been carried out.

Inquests.

Nine inquests were held during the year. Two of these were on persons who had committed suicide, two were cases of accident, and the other five were on persons who had died from natural causes.

Housing of the Working Classes.

The eighteen cottages built by the Council in the Bellaggio Road have been in constant occupation. More cottages will probably be built this year.

Drainage.

The new sewers in Lingfield and Highfield Roads have been connected with the town sewer and now discharge at the Sewage Farm. It has been found necessary to add another tank to those in use at the farm. An inquiry was held in the Autumn by the Local Government Board on the question of draining the Sunnyside District. The reply has not yet been received, but the drainage of this district is more than ever necessary, because a number of new cottages are being built there.

Factories and Workshops.

The Factories and Workshops have been regularly inspected and have been generally found in a satisfactory condition. The Slaughter-houses have been well kept, and only one complaint was received during the year of a nuisance arising from one of these houses.

The Dairies have been well managed, but it was found necessary to prosecute one Cowkeeper for keeping his cows in an insanitary condition. A conviction was obtained before the Bench and a fine inflicted.

Your Surveyor's report will show you the amount of work performed by him.

Four samples of water were submitted to me for analysis. In each instance the water was found to be of good quality.

The town was well supplied with water by the Company, and the streets were kept watered. A quarterly analysis of the water has been made by Sir Thomas Stevenson during 1905. No deleterious organisms were found in the water and it was always of a high degree of chemical purity.

The weather of 1905 was on the whole favourable to health, the Summer was fine and warm, but it was followed by a wet Autumn. The rainfall at my house, 445 feet above sea level, was 29·64 inches. This is about two inches below the average of the last twenty years.

PERCY E. WALLIS,

Medical Officer of Health.

Old Stone House,

East Grinstead,

March 30th, 1906.

VITAL STATISTICS OF EAST GRINSTEAD DISTRICT DURING 1905 AND PREVIOUS YEARS.

YEAR.	Population estimated to Middle of each year.	Births.		Total Deaths Registered in the District.				Total Deaths in Public Institutions in the District.	Deaths of Non-Residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond the District.	Nett Deaths at all Ages belonging to the District.	
				Under 1 year of age		At all Ages.						
		Number.	Rate.*	Number.	Rate per 1,000 Births registered	Number.	Rate.*				Number.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1895	5,500	127	23·09	5	39·0	98	17·8	33	27		71	12·9
1896	5,700	152	26·6	11	72·3	88	15·4	20	13		75	13·1
1897	5,800	145	25·0	29	165·0	92	15·8	26	18		74	12·7
1898	5,900	136	22·05	19	139·7	99	16·7	33	24		75	12·5
1899	6,000	172	28·6	16	93·0	97	16·1	26	14		83	13·8
1900	6,100	130	22·7	8	57·5	65	12·2	13	20		51	9·01
1901	6,150	144	23·4	13	81·02	63	10·2	9	5		48	9·2
1202	6,200	151	24·3	12	74·4	85	13·7	28	22		63	10·1
1903	6,300	159	25·2	13	81·1	84	13·3	31	20		64	9·8
1904	6,400	151	23·5	11	69·1	85	10·6	29	17		68	10·6
Averages for years 1895-1904.	6,005	144	24·5	13·7	87·4	85·6	14·1	24·8	18·0		67·2	11·3
1905	6,500	131	20·1	8	61·06	79	12·1	28	21		58	8·9

* Rates in Column 4, 8, and 13 calculated per, 1,000 of estimated population.

Note.—The deaths to be included in Column 7 of this Table are the whole of those registered during the year as having actually occurred within the district or division. The deaths to be included in Column 12 are the number in Column 7, corrected by the substraction of the number in Column 10 and the addition of the number in Column 11.

By the term "Non-Residents" is meant persons brought into the district on account of sickness or infirmity, and dying in public institutions there; and by the term "Residents" is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in public institutions elsewhere.

The "Public Institutions" to be taken into account for the purposes of these Tables are those into which persons are habitually received on account of sickness or infirmity, such as hospitals, workhouses and lunatic asylums.

Area of District in Acres (exclusive of area covered by water), **6,355.**

Total Population at all ages, **6,094**
Number of Inhabited Houses, **1,142**
Average number of Persons per house, **5.33**

At Census of 1901.